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UNITED STATES DISTRICT COURT
EASTERN DISTRICT OF MISSOURI

11th

DIVISION

DESMOND HARDY

(Write the full name of the plaintiff in this action.
Include prisoner registration number.)

Case No: _____
(to be assigned by Clerk of District Court)

v. PIKE COUNTY SHERIFF Dept.

SHERIFF STEPHEN KORTE

CHARLOTTE SHROEDER
(OFFICE MANAGER)

CORRINA HALLBECK
(JAIL ADMINISTRATOR)

(Write the full name of each defendant. The caption
must include the names of **all** of the parties.
Fed. R. Civ. P. 10(a). Merely listing one party and
writing "et al." is insufficient. Attach additional
sheets if necessary.)

Plaintiff Requests Trial by Jury
☒ Yes ☐ No

PRISONER CIVIL RIGHTS COMPLAINT UNDER 42 U.S.C. § 1983

NOTICE:

Federal Rule of Civil Procedure 5.2 addresses the privacy and security concerns resulting from public access to electronic court files. Under this rule, papers filed with the court should not contain: an individual's full social security number or full birth date, the full name of a person known to be a minor, or a complete financial account number. A filing may include only: the last four digits of a social security number, the year of an individual's birth, a minor's initials, and the last four digits of a financial account number.

Except as noted in this form, plaintiff should not send exhibits, affidavits, witness statements, or any other materials to the Clerk's Office with this complaint.

In order for your complaint to be filed, it must be accompanied by the filing fee or an application to proceed without prepayment of fees and costs.

I. The Parties to this Complaint

A. The Plaintiff

Name: DESMOND HARDY

Other names you have used: N/A

Prisoner Registration Number: 1064219

Current Institution: Fulton Reception & Diagnostic Center

Indicate your prisoner status:

<input checked="" type="checkbox"/> Pretrial detainee	<input type="checkbox"/> Convicted and sentenced state prisoner
<input type="checkbox"/> Civilly committed detainee	<input type="checkbox"/> Convicted and sentenced federal prisoner
<input type="checkbox"/> Immigration detainee	<input type="checkbox"/> Other (explain): _____

B. The Defendant(s)

To the best of your knowledge, give the information below for each defendant named in the caption of this complaint. Make sure the defendant(s) named below are the same as those listed in the caption of this complaint. Attach additional pages if necessary.

For an individual defendant, include the person's job title, and check whether you are suing the individual in his or her individual capacity, official capacity, or both.

Defendant 1

Name: STEPHEN KORTE

Job or Title: Sheriff

Badge/Shield Number: _____

Employer: Pike County Sheriff Office

Address: 1600 BUSINESS Hwy 54 WEST

Individual Capacity

☒ Official Capacity

Defendant 2

Name: CORRINA HALLBECK

Job or Title: Jail Administrator

Badge/Shield Number: _____

Employer: PIKE COUNTY SHERIFF OFFICE

Address: 1600 BUSINESS Hwy 54 WEST / Bowling Green Mo.

☐ Individual Capacity

☒ Official Capacity

II. Statement of Claim

Type, or neatly print, a short and plain statement of the **FACTS** that support your claim(s). For every defendant you have named in this complaint, you must state what he or she personally did to harm you. If more than one claim is asserted, number each claim and write a short and plain statement of each claim in a separate paragraph. Do not make legal arguments, or cite court cases or statutes. You may attach additional pages if necessary.

Your statement of claim must include all of the following information:

1. What happened to you?
2. When did it happen?
3. Where did it happen?
4. What injuries did you suffer?
5. What did each defendant personally do, or fail to do, to harm you?

What - When - Where

I was detained at Pike County Jail appr. Nov. 6 / upon my arrival I immediately noticed the dirty & unsanitary unit. I then inform the officer of my problematic respiratory problem. (black mold, condensation running down walls & pooling on floors and dirty ventilation covers)

Asking could it be cleaned or place me in another unit besides C-Pod cell 8

Injuries

After a couple of days I started having head-aches, runny nose and eyes and shortness of breathe. plus elevated blood pressure, itching and rash on hands

What

Charlotte Shroeder

- Failing to maintain proper structure and working procedure of the institution that she was responsible for.
- NEVER checking the adequate working process of the grievance procedure

Stephen Korte

- Not maintaining proper cleanliness and working order of the jail where he housed detainee's
- After my constant complaints he still neglected to work towards resolving the said matter.

Corrina Hallbeck

- Violating my access to the whole grievance procedure
- Violating my 13th Amendment right (as to the jail was dirty when I got there & I was made to clean it).

III. Injuries

If you sustained injuries related to the events alleged above, describe your injuries and state what medical treatment, if any, you required and did or did not receive.

After a couple of days I started having head-aches, runny nose & eyes and shortness of breathe, elevated blood pressure and itching/w rash on hand.

At my next institution I received 5⁴ High blood pressure meds and was diagnosed with Dyshidrotic Dermatitis and given a cream.

IV. Relief

State briefly and precisely what you want the Court to do for you. Do not make legal arguments. Do not cite any cases or statutes. If you are requesting money damages, include the amounts of any actual damages and/or punitive damages you are claiming. Explain why you believe you are entitled to recover those damages.

\$100,000 per day I was held in the facility under said conditions
\$100,000 for violation of my human rights under 13th Amendment
\$100,000 for pain and suffering due to cruel and unusual punishment
That all defendant be retrained in proper civil conduct and
procedures at Pike County Jail.

V. Exhaustion of Administrative Remedies/Administrative Procedures

The Prison Litigation Reform Act ("PLRA") 42 U.S.C. § 1997e(a), requires that "[n]o action shall be brought with respect to prison conditions under section 1983 of this title, or any other Federal law, by a prisoner confined in any jail, prison, or other correctional facility until such administrative remedies as are available are exhausted."

Administrative remedies are also known as grievance procedures. Your case may be dismissed if you have not exhausted your administrative remedies.

- A. Did your claim(s) arise while you were confined in a jail, prison, or other correctional facility?

☒ Yes

☐ No

If yes, name the jail, prison or other correctional facility where you were confined at the time of the events giving rise to your claim(s):

PIKE County - 1600 Business Hwy 54 west, Bowling Green
63334

- B. Does the jail, prison or other correctional facility where your claim(s) arose have a grievance procedure?

☒ Yes

☐ No

☐ Do not know

- C. If yes, does the grievance procedure at the jail, prison or other correctional facility where your claim(s) arose cover some or all of your claims?

☒ Yes

☐ No

☐ Do not know

If yes, which claim(s)?

THE CLEANING of molded Areas
The cleaning of the ventilation units
ALSO the CONDENSATION running down
walls and Pooling on floors

D. Did you file a grievance in the jail, prison, or other correctional facility where your claim(s) arose concerning the facts relating to this complaint?

☒ Yes

☐ No

If no, did you file a grievance about the events described in this complaint at any other jail, prison, or other correctional facility?

☐ Yes

☐ No

E. If you did file a grievance:

1. Where did you file the grievance?

Within the facility to the Jail Administrator

2. What did you claim in your grievance? (Attach a copy of your grievance, if available)

I REFERRED to the unsanitary conditions and of how it was affecting my respiratory system

3. What was the result, if any? (Attach a copy of any written response to your grievance, if available)

I was repeatedly told that SOMEONE would see to the matter but, still NO-ONE CAME

4. What steps, if any, did you take to appeal that decision? Is the grievance process completed? If not, explain why not. (Describe all efforts to appeal to the highest level of the grievance process.)

I filed additional grievances with the administrator and also one on the nurse.

- F. If you did not file a grievance:

N/A

1. If there are any reasons why you did not file a grievance, state them here:

N/A

2. If you did not file a grievance but you did inform officials of your claim, state who you informed, when and how, and their response, if any:

N/A

- G. Please set forth any additional information that is relevant to the exhaustion of your administrative remedies.

All my grievances were answered by Mrs. Hallbeck and nothing ever went above her head

(Note: You may attach as exhibits to this complaint any documents related to the exhaustion of your administrative remedies.)

VI. Previous Lawsuits

The “three strikes rule” bars a prisoner from bringing a civil action or an appeal in federal court without paying the filing fee if that prisoner has “on three or more prior occasions, while incarcerated or detained in any facility, brought an action or appeal in a court of the United States that was dismissed on the grounds that it is frivolous, malicious, or fails to state a claim upon which relief may be granted, unless the prisoner is under imminent danger of serious physical injury.” 28 U.S.C. § 1915(g).

- A. To the best of your knowledge, have you ever had a case dismissed on the basis of this “three strikes rule”?

☐ Yes

☒ No

If yes, state which court dismissed your case and when it was dismissed. Attach a copy of the court’s order, if possible.

Have you filed other lawsuits in state or federal court dealing with the same facts involved in this action?

☐ Yes

☒ No

- B. If your answer to A is yes, describe each lawsuit by answering questions 1 through 7 below. *(If there is more than one lawsuit, describe the additional lawsuits on another page, using the same format.)*

1. Parties to the previous lawsuit

Plaintiff N/A

Defendant(s) N/A

2. Court *(if federal court, name the district; if state court, name the state and county)*

3. Docket or case number N/A

4. Name of Judge assigned to your case N/A

5. Approximate date of filing lawsuit N/A
6. Is the case still pending?
- ☐ Yes
- ☒ No (If no, give the approximate date of disposition): _____
7. What was the result of the case? (For example: Was the case dismissed? Was judgment entered in your favor? Was the case appealed?)

N/A

- C. Have you filed other lawsuits in state or federal court otherwise relating to the conditions of your imprisonment?
- ☐ Yes ☒ No

- D. If your answer to C is yes, describe each lawsuit by answering questions 1 through 7 below. (If there is more than one lawsuit, describe the additional lawsuits on another page, using the same format.)

1. Parties to the previous lawsuit

Plaintiff N/A

Defendant(s) N/A

2. Court (if federal court, name the district; if state court, name the state and county)

3. Docket or case number N/A

4. Name of Judge assigned to your case N/A

5. Approximate date of filing lawsuit N/A

6. Is the case still pending?

☐ Yes

☒ No (If no, give the approximate date of disposition): _____

7. What was the result of the case? (For example: Was the case dismissed? Was judgment entered in your favor? Was the case appealed?)

VII. Certification and Closing

Under Federal Rule of Civil Procedure 11, by signing below, I certify to the best of my knowledge, information, and belief that this complaint: (1) is not being presented for an improper purpose, such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation; (2) is supported by existing law or by a nonfrivolous argument for extending, modifying, or reversing existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Rule 11.

I agree to provide the Clerk's Office with any changes to my address where case-related papers may be served. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.

I declare under penalty of perjury that the foregoing is true and correct.

Signed this 8 day of march, 20 23.

Signature of Plaintiff

Hardy Desmand

Reasons : Safety and Sanitation
Cruel and Unusual Punishment
Violation of Human Rights - Amendment 13 - Slavery Abolished

Suit Against: Pike County Sheriffs Department Missouri 1600 Business Hwy 54 WEST
Bowling Green, MO 63334
Sheriff Stephen Korte
Office Manager Charlotte Schroeder
Jail Administrator Corrina Hallbeck

Issues : ¹ ~~Not~~ Black mold through out facility and cell housing areas.
2 Black mold through out entire shower area plus walls covered in grime and filth
3 Maintenance not up to ~~the~~ legal standards including broken light fixtures, broken brackets holding up the ceiling, dust clogging ventilation, no air flow throughout housing areas, rust covering ventilation and shower nozzels, old paint chipping from cell, dayroom and shower walls

Medical Issues: Bronchitis, High Blood Pressure

Description: ^{Date you arrived to jail} On Nov. 6 22 22 I was housed at the Pike County Missouri Jail on C-Pod and placed in cell C-8. Once I entered cell C-8 I instantly noticed the black mold covering the bed fixtures, the walls through out the cell (especially around my sleeping area exactly where my head lays), the rusted ventilation, the trash covering the windows and light fixture and the condensation dripping from the ceiling, the walls and the window. I asked the correctional officer placing me if they had a healthier, cleaner environment to house me in but I was denied. On January 2, 2023 I filed my first grievance with jail administrator explaining that I have bronchitis and high blood pressure issues and that breathing in the black mold and rusty air was causing my health to worsen ~~to~~ and asked if something could be done

to relieve me of the health hazard. Administration responded that they would provide me with cleaning supplies and I could do the maintenance myself. I informed them that seeing that I am in the county jail awaiting a guilty ~~verdict~~ or innocent verdict me being forced to clean or maintain issues that were present before my arrival is in violation of my 13th Amendment right because they would be forcing me into involuntary servitude. They disregarded my constitutional right ^{plus} ~~and~~ my health and safety, left me in cell C-8 leaving me to handle Black mold with my hands and to use chemicals containing toxic fumes while having bronchitis and high blood pressure issues. After seeing the facilities nurse I noticed a rise in my blood pressure. I explained to the nurse my symptoms of a ~~runny~~ ^{daily} nose. Runny nose, dry cough, sneezing, irregular breathing and blood in my nasal cavity after blowing my nose. Again, nothing was done. I continued to grieve the issue with no relief which caused my blood pressure to continue to cause me issues. Once outside my cell things weren't any better. The condensation coming down the walls caused black mold to grow and cover majority of the walls and ceiling area. The condensation would flow to the floor causing not only the cell floors but the day room floor to have pools of water everywhere making it hazardous to even walk about the day room in order to shower, use the phone, to retrieve meals, commissary, etc. Complaining and asking for help got me nowhere. With dust covering the ceiling and over head ventilation caused eating meals in the dayroom to be hazardous and stressful. Every spoonful had to be examined before eating in fear of falling paint chips, dust and condensation that dripped from who knows where. There was even used toilet paper with feces throw against the wall and ceiling that looked like it had been there for quite sometime. I couldn't even hold the railing when going up and down the stairs with it being sticky, covered with grime meaning it was clearly germ infested. The ceiling fixtures are holding up solid tiles and the fixtures are breaking off. If one

of these tiles slip off it could cause a serious head injury. Trying to take a shower wasn't any better. The shower walls are completely covered in grime and black mold. Accidentally leaning against one of the walls could cause a staff infection or worse. Shower floors are covered with trash and hair from who knows how many people or how long its actually been there seeing that the whole time I spent in the jail, no one came in to clean or maintain its issues not once. Shower fixtures and ventilation is covered in rust as well. No fresh air flow causes me to have to breath all of this in daily while having bronchitis. No one should be forced to live in conditions like these on top of being ignored when requesting assistance. I have no choice but to continue grievances and pray for relief. No wonder my blood pressure cant stay consistent because after trying to stay alive in the shower and dayroom, i'm locked in a cell from 11pm-645am with clogged ventilation, pools of water on the floor surrounding me plus black mold all around my bed area that I am forced to breath in as I sleep causing more trauma to my lungs already affected by bronchitis. With no one trying to assist with fixing the issue.

Relief Requested: \$100,000 per day I was held in the facility under said conditions
 \$100,000 for violation of my human rights especially Amendment 13
 \$100,000 for pain and suffering due to cruel and unusual punishment
 and \$50,000 from each person involved in this claim

I declare under penalty of perjury that the foregoing is true and correct

Sign: Hardy Desmond

Date: 3-8-23

WORK DONE BY
HAR

DESMOND HARDY

RECEIVED
MAR 14 2023

BY MAIL

Court Clerk,
Will you please accept these
legal documents, copy and distribute
them to all NECESSARY parties. So
that I can proceed with my
legal complaint.

Thank You Very Much

Desmond Hardy
1664219